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File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax; 518-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM **DISCLOSURE SUMMARY PAGE**

COMMITTEE NAME (Must be same as on Statement of Orga	anization)	Ì	
Behr for Auditor		1 1	R-2 DISCLOSURE
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (8) City Cand Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot tesue	2)State PAC (3)State Party Idate (7)School Busid or Other Political	(Rev	07/2007) REPORT:
CANDIDATE COMMITTEES ONLY:	Political Party (if applicable)	1 1	ed In 3
Candidate Name Daniel Bohr	Republican	Scar	puter MM
		Audi	
Office Sought Clinton County Auditor	District (if Senate or House)		
Late reports are subject to possible civil and criminal penalties. P	ursuant to lowe Code sections 68B.32A0	7) and 68A.	401(3), the candidate, for a
Daniel Behr	563-847-7171		-18-09
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED
I AM FILING A 01/19/2009	REPORT FOR (1) ELECTION /	(2)NON-EL	ECTION YEAR.
(report date)	Indicate by #	1	
CHECK IF AMENDMENT TO REPORT DATED		acal Carami	Itees, enter Date of Election
DURECK IF AMENDMENT TO REPORT BATED		1/04/2009	
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file	of Dissolution Form DR-3.		al Committees, enter County in
STATEMENT OF CASH ON HAN	ID		
CASH ON HAND at the beginning of the reporting period. (T	otal of all funds held by the cash on hand at the end	\$	554.11
CASH ON HAND at the beginning of the reporting period. (T	otal of all funds held by the cash on hand at the end	\$	
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is ADD TOTAL MONEY TAKEN IN THIS PERIOD	otal of all funds held by the east on hand at the end first report filed.)		554.11 435.00
CASH ON HAND at the beginning of the reporting period. (Toommittee. This amount MUST be the same as the of the last reporting period or must be zero if this is ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Sche	otal of all funds held by the each on hand at the end first report filed.)	********	
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CASH ON HAND at the beginning of the reporting period. (Tommittee. This amount MUST be the same as the of the last reporting period or must be zero if this is ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule F: Loans Received total (Attach Schedule Schedule F: Loans Received total (Attach Schedule Schedule H: Total Sales of Campaign Property (Attach Schedule H: applies to Candidates' Considered total (Attach Schedule B: Expenditures total (Attach Schedule Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final reuning Loans (From Schedule E - Attach Schedule F)	rotal of all funds held by the possh on hand at the end first report filed.) dule A) (*aiso see in-kind below)	\$\$\$\$	435.00 0.00 0.00 989.11 839.23 149.88 0.00 0.00 1,850.12 0.00 YES ✓ NO
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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMI	NITTEE NAME (Must be same as on Statement of Organization)	
1	for Auditor	
Dem	Tor Auditor	

5638477173

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	VIFFOR FUND- RAISER INCOME
10/20/08	ID#	David Mangan 2157 308th Ave DeWitt, IA 52742		\$50.00	
10/17/08	ID# CK#	Dick Lincoln 2417 255th St. DeWitt, IA 52742		50.00	
10/20/08	CK#	James Owen 1312 Springbrook Ln DeWitt, IA 52742	·	100.00	
10/22/08	ID# CK#	Stephen Mangan 2223 320th Ave DeWitt, IA 52742		25.00	
10/23/08	ID# CK#	Joe Dierekx 2352 220th St DeWitt, IA 52742		50.00	
10/29/08	ID# CK#	Jill Davisson 1639 215th St Grand Mound, IA 52751		100.00	
10/29/08	ID# GK#	Clinton County Republican Central Committee Clinton, IA 52732		60.00	
	ID# OK#				
	IO# CK#				
	ID#	***			
			SUB-TOTAL	\$ 435.00	
		TOTAL (if last pag	ge of this schedule)	e 435.00	1

(for Schedule A)

\$ 435.00

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consequinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULF B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as an Statement of Organization)
Behr for Auditor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursament) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/27/08	ID# CK#	The Observer 512 7th St. DeWitt, IA 52742	advertisement	\$ 200.44
10/29/08	ID# CK#	KROS Radio 870 13th Ave N. Clinton, IA 52733	radio advertisement	108.00
10/31/08	ID# CK#	Grand Mound Communications 705 Clinton St. Grand Mound, IA 52751	advertisement	9.63
11/7/08	ID# CK#	Clinton Herald 221 6th Ave S. Clinton, IA 52732	ndye: disement	285.96
11/11/08	ID# CK#	Print Solvers 401 Maple St Eldridge, IA 52748	printing	150.00
12/05/08	ID# CK#	Clinton Herald 221 6th Ave S. Clinton, IA 52732	advertisement	85.20
	ID#			
	ID# CK#			
	<u></u>		SUB TOTAL TOTAL (if last page of this schedule)	\$ 839.23 \$ 839.23

ADDI IES TO		

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule I I instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expanditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A,402(3)(i).)

Page	1	of	1
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FOR INSTRUC	TIONS, SEE BACK OF FORM			SCHEDULE	IN-KIND
COMMITTEE	NAME (Must be same as on Statement of Organia	zation)			ONTRIBUTIONS
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DATE RECEIVED	NAME AND ADDRESS	RELATIONSHIP TO CANDIDATE	DESCRIPTION OF IN KIND	ESTIMATED FAIR MARKET	V IF FOR FUND-PAISER
(MM/DD/YR)	OF CONTRIBUTOR	* (if applicable)	CONTRIBUTION	VALUE	CONTRIBUTION
	Daniel Behr	candidate	loan forgiveness	\$ 1,850.12	
12/26/08	809 Fulton St	Candidate	ioan loigiveness	,,,,,,,,,,	
	Grand Mound, IA 52751	<u> </u>			
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"Disclosure la	w requires candidates to disclose the relationship	of any relative making a	ın in kind contribution to ti	ne Page <u>l</u>	of 1
committee E	Relationship must be shown to the third degree of c (See Page 2 of forms packet.) If surname of cor	anganguinity (blood reli	anues) and amingy (relativ	es	(for Schedule E)
oy mamage). familial relatio	(See Page 2 of forms packet.) If surname or con enship, enter "not applicable" in the relationship col	umn.	ANIIAIAAIA AAI IIIBIB IB IIA		

L UNPAID LO	e reports money loaned to the committee which is deposited in ANS FROM <u>LAST</u> REPORTING PERIOD \$ 2000.00 IY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD		AMENDING FOR
Original so DATE RECEIVED MIM/DD/YR)	ource of loan, such as a bank, must be shown if a third party is NAME AND ADDRESS OF LENDER (include Endorsor's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicab	AMOUNT OF LOAN
			\$
			+
1			}
		TOTAL (PART I)	\$
(Loans f	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIO Torgiven must be reported on Schedule E — In-kind Contribution NAME AND ADDRESS OF LENDER	S.)	\$AMOUNT REPAID
(Loans f	orgiven must be reported on Schedule E - In-kind Contribution	DD s.)	³ 140 88
(Loans for DATE PAID (MWDD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Daniel Behr 809 Fulton St	RELATIONSHIP TO CANDIDATE* (If Applica	³ 140 88
(Loans for DATE PAID (MWDD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Daniel Behr 809 Fulton St	RELATIONSHIP TO CANDIDATE* (If Applica	³ 140 88
(Loans for DATE PAID (MWDD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Daniel Behr 809 Fulton St	RELATIONSHIP TO CANDIDATE* (If Applica	³ 140 88
(Loans for DATE PAID (MWDD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) Daniel Behr 809 Fulton St Grand Mound, IA 52751	RELATIONSHIP TO CANDIDATE* (If Applica	³ 140 88